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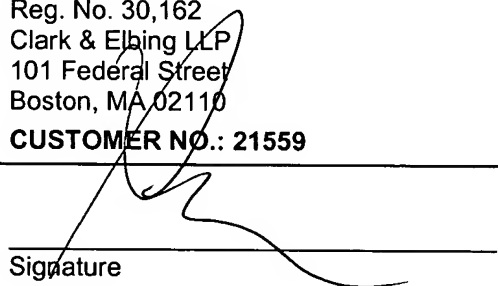
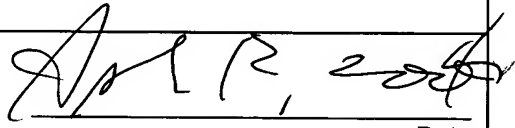
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UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. § 1.53(b)

Attorney Docket Number	04712/050002
Applicant	Aron D. Rosenberg et al.
Title	OSTEOINDUCTIVE BONE MATERIAL
PRIORITY INFORMATION:	
This application claims the benefit of the filing date of U.S. Provisional Application No. 60/462,416, filed on April 11, 2003, which is incorporated herein by reference.	
SMALL ENTITY STATUS:	
<input checked="" type="checkbox"/> Applicant claims small entity status under 37 C.F.R. § 1.27.	
APPLICATION ELEMENTS:	
Cover sheet	1 page
Specification	46 pages
Claims	17 pages
Abstract	1 page
Drawings	1 sheet
Combined Declaration and Power of Attorney, which is: <input checked="" type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input type="checkbox"/> A copy from prior application [**SERIAL NUMBER**] and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.	3 pages
Sequence Statement	[**] pages
Sequence Listing on Paper	[**] pages
Sequence Listing on Diskette	[**] disk
Preliminary Amendment	[**] pages
Information Disclosure Statement	[**] pages
Form PTO 1449	[**] pages
Cited References	[**] references
Recordation Form Cover Sheet and Assignment	[**] pages

English Translation	[**] pages
Certified Copy of Priority Document	[**] pages
Non-publication Request under 35 U.S.C. § 122(b).	[**] pages
Request for Deferral of Examination under 37 C.F.R. § 1.103(d)	[**] pages
A Small Entity Statement	[**] pages
Return Receipt Postcard	1
FILING FEES:	
Basic Filing Fee: \$385	\$385.00
Excess Claims Fee: 83-20 x \$9	\$567.00
Excess Independent Claims Fee: 10-3 x \$43	\$301.00
Multiple Dependent Claims Fee: \$290/\$145	\$****
Total Fees:	\$1,253.00
<input type="checkbox"/> Enclosed is a check for [**AMOUNT**] to cover the total fees. <input type="checkbox"/> Charge [**AMOUNT**] to Deposit Account No. 03-2095 to cover the total fees. <input checked="" type="checkbox"/> The filing fee is not being paid at this time. <input checked="" type="checkbox"/> Please apply any other charges or any credits to Deposit Account No. 03-2095.	
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 Signature	 Date